## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Ms Virginia Morales Teran	an					
	(b) Address (number and street) 10446 geil street	☐ Check if address changed				Candidate's FEC Identification Number     P60015047	
_	(c) City, State, and ZIP Code					3. Is This New Amended	
	Castroville	CA 95012-2568			2-2568	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sought			6. State & Distr	ict of Candidate	
	dem	Presidential					
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full) FRATERNAL ASSOCIATION NUESTRA DYNASTIA						
	(b) Address (number and street) 10446 GEIL STREET						
	(c) City, State, and ZIP Code						
	CASTROVILLE				CA	95012	
	O/IOTICOVILLE						
(Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.  NOTE: This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)  (b) Address (number and street)							
(c) City, State, and ZIP Code							
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
	gnature of Candidate					Date	
<i>M</i>	Is Virginia Morales Teran			[Elect	ronically Filed]	09/11/2015	
N	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						
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FEC FORM 2 (REV. 02/2009)

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC' 5 'F9 DCF HZ' G7 < 98 I @ 'C F' + H9 A = N5 H+C B

Form/Schedule: F2A Transaction ID:

Disabled, US citizen, Female, Low Income

Form/Schedule: Transaction ID: